

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>End Citizens United</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00573261	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Wavelength Strategy Inc</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 18 / 2022</b>	
Mailing Address <b>2607 Monroe St NE</b>		Amount <b>122000.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20018-2917</b>	Transaction ID : <b>500142691</b>
Purpose of Expenditure <b>Media Buy</b>	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 17 / 2022</b>	
Name of Federal Candidate <b>WALKER, HERSCHEL, MR., ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>
Calendar Year-To-Date Per Election for Office Sought <b>140000.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Run-off General</b>	

Full Name of Payee <b>Wavelength Strategy Inc</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 18 / 2022</b>	
Mailing Address <b>2607 Monroe St NE</b>		Amount <b>18000.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20018-2917</b>	Transaction ID : <b>500142692</b>
Purpose of Expenditure <b>Media Production</b>	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 17 / 2022</b>	
Name of Federal Candidate <b>WALKER, HERSCHEL, MR., ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>
Calendar Year-To-Date Per Election for Office Sought <b>140000.00</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input checked="" type="checkbox"/> Other (specify) ▶ <b>Run-off General</b>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>140000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>140000.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Coleman, Kimberly, , ,***[Electronically Filed]**

Date

MM / DD / YYYY  
**11 / 18 / 2022**

Signature